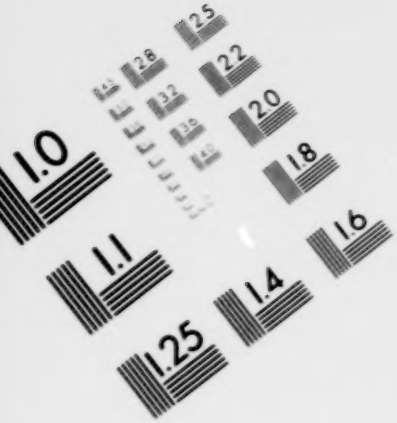

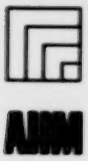

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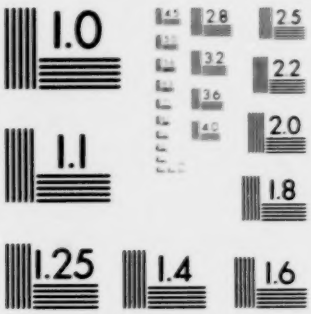

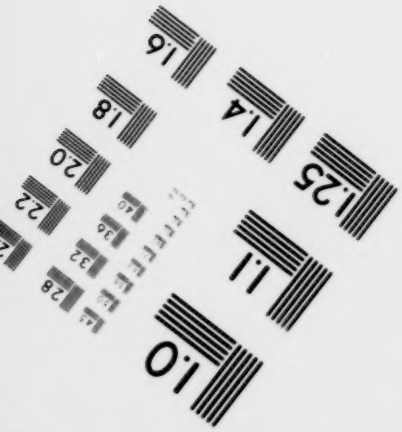

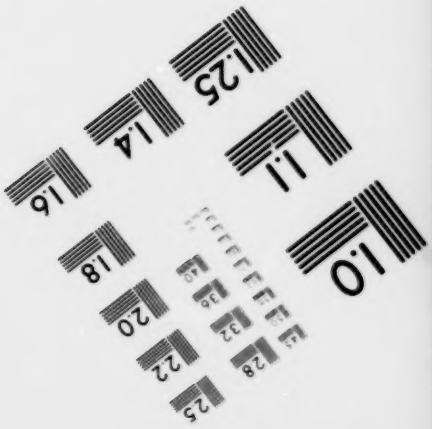

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ABSTRACT

A survey of 34 teachers of students who are deaf and hard-of-hearing and 27 speech-language pathologists licensed by the Pennsylvania Board of Examiners in Speech and Hearing investigated who was more qualified to serve this population. The survey consisted of three parts: demographic information, questions about graduate preparation, and a test of knowledge and competency in the field of deaf and hard-of-hearing habilitation/rehabilitation. Results indicate almost all subjects believed the teachers were better prepared overall to work with this population. Eighty-eight percent of the teachers felt they were prepared in teaching language and reading to persons with hearing loss as opposed to only 41 percent of the speech language pathologists. Teachers also averaged 77.14 percent on the test of knowledge and competency (questions were extracted from two documents, a position paper from the American Speech-Language-Hearing Association and the Council for Exceptional Children's Council on Education of the Deaf's Joint Knowledge and Skills Document), whereas speech pathologists averaged 58.52 on the same set of questions. The different qualifications of teachers of the deaf and hard-of-hearing and speech-language pathologists are reviewed along with certification requirements. The licensing requirements of Pennsylvania are also discussed. (CR)

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Speech-Language Pathologists or Teachers of the Deaf/Hard of Hearing: Who is More Qualified to Serve?

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A professional serving persons with hearing loss in all its facets must be a person who has requisite training in several areas. Competencies have been established by two organizations which certify professionals to work with language and hearing disorders. These are the Council on Education of the Deaf (CED) and the American Speech-Language and Hearing Association (ASHA). Both agencies also accredit programs that train professionals to work with persons with hearing impairments and certify professionals graduating from those programs. CED strives to make certain that all teachers and health care providers who are trained to work with deaf and hard of hearing persons are competent in all areas of communication, language development, academic achievement and psychosocial functioning. ASHA certifies audiologists and speech-language Pathologists to serve a wide variety of hearing, speech, and language disorders. Many states, including New York State, certify both professionals as teachers. Teacher of Deaf /Hard of Hearing Students vs. Teacher of Speech and Hearing Impaired Students.

PROBLEM STATEMENT

This research proposed to determine whether teachers of the deaf and hard of hearing or speech-language instructors are more qualified to serve persons who are deaf and hard of hearing.

Teachers of the deaf and hard of hearing are concerned primarily with communication and language. Teachers of the deaf and hard of hearing specialize in methods of communication and instruction for deaf and hard of

hearing persons. These services focus on any aspect of life that is affected by the persons hearing loss. Language, academics, psycho-social, vocational, and communication considerations are the primary targets (CED, 1974). A teacher of the deaf and hard of hearing differs from a speech-language pathologist in that a teacher of the deaf and hard of hearing is trained to deal with one exceptionality. A speech-language pathologists may deal with more than ten different speech and language disorders. The teacher's focus is on preparation for functioning in life. The speech-language pathologists focus is on communication. The basic issue to be addressed is a result of schools choosing to hire a speech-language pathologist to fulfill an IEP requirement for a teacher of a deaf or hard of hearing student.

A teacher of the deaf and hard of hearing must first be certified in a primary or secondary education area, (CED, 1974). This exposure increases the teacher's ability to deal with the variety of teaching situations and additional exceptionalities that present themselves in a therapy setting.

ASHA maintains that effective management of hearing impairment must address medical, and communicative considerations (ASHA, 1993). The question proposed by this study was "What profession is best trained and suited for delivering such effective management?" The null hypothesis stated that there would be no difference in competencies in the field of hearing loss between speech-language pathologists and teachers of the deaf and hard of hearing.

METHOD

Thirty-four teachers of the deaf and hard of hearing and twenty-seven speech-language pathologists participated in this study. All subjects were licensed by the Pennsylvania Board of Examiners in Speech and Hearing. The subjects were selected using a table of random numbers from the total pool of licensed teachers and speech-language pathologists. There was no attempt to control for sex, age, or years of service of the subjects.

SURVEY PROCEDURE

Surveys were sent to one-hundred teachers of the deaf and hard of hearing and one-hundred speech-language pathologists. The instrument used in this survey was designed by the researchers for exclusive use in this study. The survey consisted of three parts: 1) demographic information, 2) questions about graduate preparation, and 3) a test of knowledge and competency in the field of deaf and hard of hearing habilitation/rehabilitation. Demographic information was also requested of the subjects. Demographic questions asked for descriptive information regarding certification and licensure, number of deaf or hard of hearing persons served, and primary work environment. Ten questions asked the subjects to rate their graduate preparation for working with deaf and hard of hearing persons.

The second part of the survey consisted of ten knowledge and skill-based competency questions. The questions were extracted from two documents: 1) a position paper from the American Speech-Language and Hearing Association

entitled "Definition of and Competencies for Aural Rehabilitation," (ASHA, 1984) and 2) The CEC-CED Joint Knowledge and Skills Document (ASHA, 1984).

RESULTS

Demographic Analysis

One question in the demographic information provided a dramatic comparison. In answer to the question"Judging from your experience, do you feel that speech-language pathologists or teachers of the deaf/hard of hearing are better equipped by training programs to serve the needs of clients with hearing loss?" Speech-language pathologists stated twenty-six to one that teachers of the hearing impaired were better prepared. Thirty-three teachers of the deaf stated that teachers of the deaf and hard of hearing were better prepared. One teacher stated that speech-language pathologists were better prepared. This self-report of perceived superior preparation was statistically significant.

Statistical Analysis of Graduate Preparation

A Chi-Square Analysis of the graduate school preparation indicated that the most informative data was the high percentage of teachers of the deaf and speech-language pathologists who responded that they had been prepared in teaching speech to persons with hearing loss. There was less than a two percent difference in this area. The greatest disparity occurred in teaching language and reading to persons with hearing loss. In this category 88 percent of the teachers

indicated that they were well prepared, compared with only 41 percent of speech-language pathologists who answered that they were well prepared.

Statistical Analysis of Knowledge and Competency

The t-test analysis of the test of knowledge and competency indicated a mean difference of 1.862. The degree of freedom was sixty with a t-value of 4.751. Teachers of the deaf and hard of hearing averaged 77.14 percent on the test of knowledge and competency. Speech-language pathologists averaged 58.52 percent on the same set of questions. Variance among the teachers was 19.75 percent, while variance among the speech-language pathologists was 28.32. The difference in these test scores was also significant.

DISCUSSION

Parents of students who are deaf or hard of hearing seeking is services from speech-language pathologists should be aware of these data. Speech-language pathologists are trained as generalists to serve the wide variety of communication disorders. Such generalization in training may not equip speech-language pathologists to learn about or deal with language development of deaf persons or the variety of methods of communication with and instruction of the deaf and hard of hearing. From the test of knowledge, one can infer that teachers of the deaf and hard of hearing have more specific knowledge and training to work with persons with hearing loss.

In the state of Pennsylvania teachers of the deaf and hard of hearing with master's degrees receive a minimum of thirty-six hours in language

development, teaching speech to persons who are deaf or hard of hearing, designing specially designed curriculum, counseling parents, aural rehabilitation, and methods of communication and instruction. In addition, they are required to engage in at least twelve weeks of supervised practicum experience with persons who are deaf and hard of hearing.

The Commonwealth of Pennsylvania now licenses teachers of the deaf and hard of hearing in the same law that provides licensure to speech-language pathologists and audiologists. Further, Senate Bill 515 provides that all three groups of professionals licensed by the Board of Hearing Examiners be considered "health service doctors" (Senate Bill 515). This designation allows teachers of the deaf and hard of hearing to bill third-party payers under codes recognized by the American Medical Association for evaluation and treatment of aural rehabilitation and communication. Ethical Principle IV f 2 of this code states "A licensee may not misrepresent training or competence" (PA Code 49§45 1994).

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